05/26/2011 15:53

(Rev. 12/2004)

Image# 11931527028

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines COUNTRY FIRST POLITICAL ACTION COMMITTEE 228 S WASHINGTON STREET SUITE 115 ADDRESS (number and street) Check if different than previously **ALEXANDRIA** ٧A 22314 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00457705 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Oct 20 (M10) Apr 20 (M4) Jul 20 (M7) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 23 2010 12 3 1 2010 1 1 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mr. Sal Purpura Type or Print Name of Treasurer Electronically Filed by Mr. Sal Purpura 05 26 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X**

FE6AN026

Use

Only

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS
Page 2

Write or Type Committee Name
COUNTRY FIRST POLITICAL ACTION COMMITTEE

FEC Form 3X (Rev. 02/2003)

" D 11 23 2010 12 31 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 253482.46 January 1 (b) Cash on Hand at 24874.49 Begining of Reporting Period 8946.80 573020.92 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 33821.29 826503.38 6(a) and 6(c) for Column B) 17665.43 810347.52 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 16155.86 16155.86 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 12315.57 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 15734.88 Schedule C and/or Schedule D)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

м м 1 1 23 м°м 12 3 1 2010 2010 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 8650.00 199280.00 (i) Itemized (use Schedule A) 296.80 217610.42 (ii) Unitemized (iii) TOTAL (add 8946.80 416890.42 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 69250.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 8946.80 486140.42 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 2503.54 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 619.40 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 83757.56 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 8946.80 573020.92 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 8946.80 573020.92 (subtract Line 18(c) from Line 19)

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements FEC. Form 3X (Rev. 02/2003) Page 4

| II. DISBURSEMENTS | COLUMN A | COLUMN B | |
|--|-------------------|-----------------------|--|
| Operating Expenditures: | Total This Period | Calendar Year-to-Date | |
| (a) Shared Federal/Non-Federal | | | |
| Activity (from Schedule H4) (i) Federal Share | 0.00 | 0.00 | |
| (ii) Non-Federal Share | 0.00 | 0.00 | |
| (b) Other Federal Operating Expenditures | 17615.43 | 701132.52 | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) | 17615.43 | 701132.52 | |
| 2. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 | |
| Contributions to Federal Candidates/Committees and Other Political Committees | 0.00 | 87700.00 | |
| Independent Expenditure (use Schedule E) | 0.00 | 0.00 | |
| 5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 | |
| 6. Loan Repayments Made | 0.00 | 0.00 | |
| 7. Loans Made | 0.00 | 0.00 | |
| 8. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees | 50.00 | 9515.00 | |
| (b) Political Party Committees | 0.00 | 0.00 | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 50.00 | 9515.00 | |
| 9. Other Disbursements | 0.00 | 12000.00 | |
| 0. Federal Election Activity (2 U.S.C 431(20)) | | | |
| (a) Shared Federal Election Activity | | | |
| (from Schedule H6) | 0.00 | 2.22 | |
| (i) Federal Share | 0.00 | 0.00 | |
| (ii) "Levin" Share | 0.00 | 0.00 | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 | |
| 31. Total Disbursements (add Lines 21(c), 22, | 17005 40 | 040047.50 | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 17665.43 | 810347.52 | |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) | | | |
| from Line 31) | 17665.43 | 810347.52 | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

| | III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|---|----------------------------|-----------------------------------|
| 33. | Total Contributions (other than loans) from Line 11(d), page 3) | 8946.80 | 486140.42 |
| 34. | Total Contribution Refunds (from Line 28(d)) | 50.00 | 9515.00 |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33) | 8896.80 | 476625.42 |
| 36. | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 17615.43 | 701132.52 |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 619.40 |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36) | 17615.43 | 700513.12 |

FE6AN026

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 6 / 27 (check only one) X |
|--|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION | Statements may not be sold or used by any persone name and address of any political committee to DN COMMITTEE | on for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) DR. BAPU P. AREKAPUDI, MD Mailing Address 2734 N LINCOLN AV City CHICAGO FEC ID number of contributing federal political committee. Name of Employer LAKE SHORE MEDICAL ASSOCI- ATES Receipt For: Primary General Other (specify) | State Zip Code IL 60614-1321 C Occupation PHYSICIAN MD Aggregate Year-to-Date 275.00 | Date of Receipt M M J D D J Z D 1 D Transaction ID: SA11.3074444 Amount of Each Receipt this Period 25.00 CONTRIBUTION |
| Full Name (Last, First, Middle Initial) DR. MICHAEL BARNARD Mailing Address 681 PIFER RD City HOUSTON FEC ID number of contributing federal political committee. Name of Employer SELF-EMPLOYED Receipt For: Primary General Other (specify) | State Zip Code TX 77024-5432 C Occupation M.D. Aggregate Year-to-Date ▼ 225.00 | Date of Receipt M M M / D D / Y Y Y Y Y 1 1 |
| Full Name (Last, First, Middle Initial) MS. BARBARA CARDIN Mailing Address 815 JANTAIL COUR' City REDDING FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify) | State Zip Code CA 96003-4577 C Occupation COUNTY RETIREE Aggregate Year-to-Date 300.00 | Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SUBTOTAL of Receipts This Page (optional) | | 75.00 |

| | SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|-----|--|--------------------------------|---|--|
| 4 | Any information copied from such Reports and Sor for commercial purposes, other than using the | Statements ma e name and ad | y not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTIC | N COMMIT | ΓEE | |
| ۷. | Full Name (Last, First, Middle Initial) DR. FREDERICK CONARD | | | Date of Receipt |
| | Mailing Address 22 SUNSET FARM Re | OAD | | 11 |
| | City WEST HARTFORD | State CT | Zip Code 06107-1314 | Transaction ID: SA11.3074437 |
| | FEC ID number of contributing federal political committee. | C | 06107-1314 | Amount of Each Receipt this Period 25.00 |
| | Name of Employer JEFFERSON RADIOLOGY, PC | Occupatio | | CONTRIBUTION |
| | Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 275.00 | |
| _ | Full Name (Last, First, Middle Initial) MRS. DEBRA I. DAY | | | Date of Receipt |
| | Mailing Address 2342 NE 29TH STREET | | | 1 1 3 0 Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: SA11.3074421 |
| | LIGHTHOUSE POINT | FL | 33064-8131 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.00 CONTRIBUTION |
| | Name of Employer HOMEMAKER | Occupation HOMEM | | CONTRIBUTION |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 550.00 | |
| . – | Full Name (Last, First, Middle Initial) MS. JACQUELINE DODD | | | Date of Receipt |
| | Mailing Address 1700 W CEDAR ST | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: SA11.3074417 |
| | EL DORADO | AR | 71730-5310 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 CONTRIBUTION |
| | Name of Employer SELF-EMPLOYED | | STATE BROKER/APPRAISE | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 225.00 | |
| | SUBTOTAL of Receipts This Page (optional) . | • | | 100.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 8 / 27 (check only one) X |
|--|---|---|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTIO | e name and add | dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) MR. RICHARD L. HARTMAN Mailing Address 2858 E WATFORD Co City QUEEN CREEK FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General | State AZ C Occupation RETIRE | O Year-to-Date ▼ | Date of Receipt M M 30 2010 Transaction ID: SA11.3074443 Amount of Each Receipt this Period 25.00 CONTRIBUTION |
| Full Name (Last, First, Middle Initial) MR. THOMAS IRWIN Mailing Address 1542 NEWPORT BLV City COSTA MESA FEC ID number of contributing federal political committee. Name of Employer NEWPORT MESA ANIMAL HOSPITAL Receipt For: Primary General Other (specify) | State CA C Occupation VETERIN | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) Charles A. Jenkins Mailing Address 2556 S. Jellison Crt. City Lakewood FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) | State CO C Occupation Veterinar Aggregate | | Date of Receipt M M M |
| SUBTOTAL of Receipts This Page (optional) | | | 2475.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 9 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|---|--|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION | Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to any COMMITTEE | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) MR. ROBERT LANPHIER Mailing Address 2681 S. NEWARK CT City AURORA FEC ID number of contributing federal political committee. Name of Employer SELF-EMPLOYED Receipt For: Primary General Other (specify) | State Zip Code CO 80014-1835 C Occupation RESTAURANT OWNER Aggregate Year-to-Date ▼ 275.00 | Date of Receipt M M M / 30 / 2010 Transaction ID: SA11.3074419 Amount of Each Receipt this Period 25.00 CONTRIBUTION |
| Full Name (Last, First, Middle Initial) MS. LEIGH A. MILLS Mailing Address 7617 WEXFORD CLL City JACKSONVILLE FEC ID number of contributing federal political committee. Name of Employer GREENE-HAZEL & ASSOCIATES Receipt For: Primary General Other (specify) | State Zip Code FL 32256-2311 C Occupation EMPLOYEE BENEFITS CONSULTAL Aggregate Year-to-Date 275.00 | Date of Receipt M M |
| Full Name (Last, First, Middle Initial) MR. ARUN PAUL NARANG Mailing Address 23689 W. PETITE LA City LAKE VILLA FEC ID number of contributing federal political committee. Name of Employer UPP BUSINESS SYSTEMS Receipt For: Primary General Other (specify) | State Zip Code IL 60046-7298 C Occupation IT MANAGER Aggregate Year-to-Date ▼ 900.00 | Date of Receipt M M J J J J J J J J J J J J J J J J J |
| SUBTOTAL of Receipts This Page (optional) . | | 150.00 |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 10 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|---|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION | Statements may not be sold or used by any pene name and address of any political committee | |
| Full Name (Last, First, Middle Initial) MR. ARUN PAUL NARANG Mailing Address 23689 W. PETITE LA City LAKE VILLA FEC ID number of contributing federal political committee. Name of Employer UPP BUSINESS SYSTEMS Receipt For: Primary General Other (specify) ▼ | State Zip Code IL 60046-7298 C Occupation IT MANAGER Aggregate Year-to-Date 900.00 | Date of Receipt M M J 30 2010 Transaction ID: SA11.3074424 Amount of Each Receipt this Period 300.00 CONTRIBUTION |
| Full Name (Last, First, Middle Initial) MR. ARUN PAUL NARANG Mailing Address 23689 W. PETITE LA City LAKE VILLA FEC ID number of contributing federal political committee. Name of Employer UPP BUSINESS SYSTEMS Receipt For: Primary General Other (specify) | State Zip Code IL 60046-7298 C Occupation IT MANAGER Aggregate Year-to-Date 900.00 | Date of Receipt M M M / D D / Y Y Y Y Y 1 1 |
| Full Name (Last, First, Middle Initial) MR. ARUN PAUL NARANG Mailing Address 23689 W. PETITE LA City LAKE VILLA FEC ID number of contributing federal political committee. Name of Employer UPP BUSINESS SYSTEMS Receipt For: Primary General Other (specify) | State Zip Code IL 60046-7298 C Occupation IT MANAGER Aggregate Year-to-Date 900.00 | Date of Receipt M M J 30 2010 Transaction ID: SA11.3074426 Amount of Each Receipt this Period 100.00 CONTRIBUTION |
| SUBTOTAL of Receipts This Page (optional) | | 600.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 11 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 |
|---|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION | | son for the purpose of soliciting contributions to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) MR. ARUN PAUL NARANG Mailing Address 23689 W. PETITE LA City LAKE VILLA FEC ID number of contributing federal political committee. Name of Employer UPP BUSINESS SYSTEMS Receipt For: Primary General Other (specify) | State Zip Code IL 60046-7298 C Occupation IT MANAGER Aggregate Year-to-Date 900.00 | Date of Receipt M M M / 3 0 / 2 0 1 0 Transaction ID: SA11.3074427 Amount of Each Receipt this Period 100.00 CONTRIBUTION |
| Full Name (Last, First, Middle Initial) MR. TIMOTHY OHARA Mailing Address 15 EAST 91ST ST AI City NEW YORK FEC ID number of contributing federal political committee. Name of Employer CREDIT SUISSE SECURITIES USA LLC Receipt For: Primary General Other (specify) | State Zip Code NY 10128-0648 C Occupation INVESTMENT BANKER Aggregate Year-to-Date 5000.00 | Date of Receipt M M M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) MR. ROBERT E. PROUDLEY Mailing Address 10000 RENFREW RO City SILVER SPRING FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify) | State Zip Code MD 20901-2219 C Occupation RETIRED Aggregate Year-to-Date 225.00 | Date of Receipt M M M / 3 0 / 2 0 1 0 Transaction ID: SA11.3074409 Amount of Each Receipt this Period 25.00 CONTRIBUTION |
| SUBTOTAL of Receipts This Page (optional) | | 5125.00 |

| | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 12 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 17 | |
|----|---|--|---|---|--|
| | Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements ma e name and ad | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. | |
| | COUNTRY FIRST POLITICAL ACTIO | COUNTRY FIRST POLITICAL ACTION COMMITTEE | | | |
| Α. | Full Name (Last, First, Middle Initial) MS. MARY JO PUGH | | | Date of Receipt | |
| | Mailing Address 428 CAVAYO TRL | | | 11 30 7 2010 | |
| | City HELOTES | State TX | Zip Code 78023-4392 | Transaction ID: SA11.3074422 Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 25.00 | |
| | Name of Employer VA | Occupation RESEAF | on RCH HEALTH SCIENTIST | CONTRIBUTION | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 275.00 | | |
| В. | Full Name (Last, First, Middle Initial) OLGA SEYB | 1 | | Date of Receipt | |
| | Mailing Address P.O. BOX 8062 | | | 11 30 2010 | |
| | City NEWPORT BEACH | State CA | Zip Code | Transaction ID: SA11.3074418 | |
| | FEC ID number of contributing federal political committee. | C | 92658-8062 | Amount of Each Receipt this Period 25.00 | |
| | Name of Employer MAD SCIENCE | Occupation AFTER S | on SCHOOL PROGRAM TEACH | CONTRIBUTION HER | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 275.00 | | |
| C. | Full Name (Last, First, Middle Initial) MR. ADOLF SGAMBELLURI | | | Date of Receipt | |
| | Mailing Address 9 LADERA CIRCLE NIMITZHILL ESTATES | 6 | | 11 30 7 2010 | |
| | City PITI | State GU | Zip Code 96915-5404 | Transaction ID: SA11.3074431 Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 25.00 | |
| | Name of Employer RETIRED | Occupation U.S. MA | n RINE CORPS (RET) | CONTRIBUTION | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 325.00 | | |
| | SUBTOTAL of Receipts This Page (optional) | 1 | | 75.00 | |
| | TOTAL This Period (last page this line number | only) | | | |

PAGE 13/27 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MR. MARC TERRILL Date of Receipt A. Mailing Address 5615 W. ACOMA DRIVE 30 2010 1.1 APT. 7 City State Zip Code Transaction ID: SA11.3074434 **GLENDALE** ΑZ 85306-4260 Amount of Each Receipt this Period FEC ID number of contributing 25.00 C federal political committee. CONTRIBUTION Name of Employer US AIRWAYS GROUP, LLC Occupation PILOT INSTRUCTOR Receipt For: Aggregate Year-to-Date Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) В. MS. JANINE WEGNER Date of Receipt Mailing Address 13913 S 39TH CIR 30 2010 City Transaction ID: SA11.3074414 State Zip Code **BELLEVUE** NE 68123-3723 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. CONTRIBUTION Name of Employer THANKSGIVING LUTHERAN Occupation YOUTH AND FAMILY COORDINATOR Receipt For: Aggregate Year-to-Date ▼ Primary General

| | | 50.00 |
|---|----------|---------|
| SUBTOTAL of Receipts This Page (optional) | | |
| TOTAL This Period (last page this line number only) | • | 8650.00 |

275.00

Other (specify)

В.

C.

| SCHEDULE B (FEC Form 3X) | II | FOR LINE N | NUMBER: PAGE 14/27 |
|--|---|--------------------|---|
| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only | one) |
| | Detailed Summary Page | X 21b 27 | 22 23 24 25 26 28a 28b 28c 29 30b |
| Any Information copied from such Reports and Statem | | | |
| or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) | e and address of any political | committee to solid | cit contributions from such committee |
| COUNTRY FIRST POLITICAL ACTION CO | OMMITTEE | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: SB21.7 |
| WHITNEY CLARK | | | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address PO BOX 16664 | | | 12 |
| , | State Zip Code VA 22215 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement PAYROLL | | • • | 138.52 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President | ement For: Primary General Other (specify) | | |
| State: District: | | | |
| Full Name (Last, First, Middle Initial) WHITNEY CLARK | | | Transaction ID: SB21B.3 Date of Disbursement |
| Mailing Address PO BOX 16664 | | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $ |
| , | State Zip Code VA 22215 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement PAYROLL | 22213 | - | 138.52 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President State: District: | ement For: Primary General Other (specify) | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: SB21B.5 |
| WHITNEY CLARK | | | Date of Disbursement |
| Mailing Address PO BOX 16664 | | | M 2 M / D 1 5 / Y 2 0 1 0 Y |
| | State Zip Code VA 22215 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement PAYROLL | | | 138.52 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President | ement For: Primary Other (specify) | Туре | |
| State: District: | | | |
| SUBTOTAL of Disbursements This Page (optional) . | | | 415.56 |

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE B (FEC Form 3X)

FOR LINE NUMBER: PAGE 15/27 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21.2 AMBER JOHNSON Date of Disbursement 3 Ŏ 1 1 2010 Mailing Address PO BOX 16664 City State Zip Code Amount of Each Disbursement this Period ARLINGTON VA 22216 3138.01 Purpose of Disbursement **PAYROLL** Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21.4 AMBER JOHNSON Date of Disbursement 15 2010 Mailing Address PO BOX 16664 City State Zip Code Amount of Each Disbursement this Period ARLINGTON V۸ 22216 3138.01 Purpose of Disbursement PAYROLL Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21.6 AMBER JOHNSON Date of Disbursement 3 1 2010 Mailing Address PO BOX 16664 City State Zip Code Amount of Each Disbursement this Period ARLINGTON VA 22216 3138.01 Purpose of Disbursement **PAYROLL** Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 9414.03

SUBTOTAL of Disbursements This Page (optional) ...

TOTAL This Period (last page this line number only)

 \triangleright

В.

C.

| age# 11931327043 | | | |
|--|---|---------------------------|--|
| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE I (check only | |
| Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam | | by any person fo | or the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION C | OMMITTEE | | |
| Full Name (Last, First, Middle Initial) DERBY H WATKINS | | | Transaction ID: SB21.1 Date of Disbursement |
| Mailing Address 3232 WELLINGTON RD | | | $ \begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} $ $ \begin{bmatrix} 1 & 2 & 9 \\ 2 & 9 \\ 1 & 2 & 0 & 1 & 0 \end{bmatrix} $ |
| City ALEXANDRIA | State Zip Code VA 22302 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement FINANCE CONSULTING Candidate Name | | Category/ | 3000.00 |
| Office Sought: House Disburse Senate President State: District: | ement For: Primary General Other (specify) | Туре | |
| Full Name (Last, First, Middle Initial) DERBY H WATKINS Mailing Address 3232 WELLINGTON RD | r | | Transaction ID: SB21.3 Date of Disbursement M M M / D D M Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | | Amount of Each Disbursement this Period |
| ALEXANDRIA Purpose of Disbursement VOID-FINANCE CONSULTING | VA 22302 | | -3000.00 |
| Candidate Name | | Category/ Type | |
| Senate President | ement For: Primary General Other (specify) | | |
| State: District: Full Name (Last, First, Middle Initial) ADMINISTAFF | | | Transaction ID: SB21.17 Date of Disbursement |
| Mailing Address 19001 CRESCENT SPR | INGS DR | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \ \begin{smallmatrix} V & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$ |
| City KINGWOOD | State Zip Code TX 77339 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement PAYROLL SVC-INSURANCE-TAXES | | | 854.66 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President | ement For: Primary | | |
| State: District: | | | |
| SUBTOTAL of Disbursements This Page (optional) | | > | 854.66 |

TOTAL This Period (last page this line number only)

В.

C.

| SCHEDULE B (FEC Form 3X) | Use separate schedule(s | | | OR LIN | | | R: | | PAGE 17/27 | | | | | |
|---|--------------------------------------|------------------------------|------|---------------|---|-----------------|-------|-----------|------------|------------------|------------|----------|----------------|--|
| ITEMIZED DISBURSEMENTS | | tegory of the ummary Page | Ò | 21b 27 | П | 22 28a | | 23 28b | F | 24 | F | 25 29 | 26 30b | |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name | | | | | | | | | | | | | | |
| NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION CO | OMMITTEE | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) ADMINISTAFF Mailing Address 19001 CRESCENT SPRI | NCC DD | | | | | Date o | | isburs | | | | ž 0 1 | 0 ^Y | |
| | | Zip Code | | | _ | | nt o | | Ť | Disburs | | | | |
| KINGWOOD | | 77339 | | | | Aillou | iii o | Lac | | Disbuis | | | | |
| Purpose of Disbursement PAYROLL SVC-INSURANCE-TAXES Candidate Name | | | | | | | | | | • | | 854.6 | 0 | |
| Cardidate Name | | | | egory/ vpe | | | | | | | | | | |
| Office Sought: House Disburse Senate President State: District: | ment For: Primary Other (speci | General ▼ | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) ADMINISTAFF | | | | | | Trans Date o | | - | | SB2 ⁻ | 1.19 | | | |
| Mailing Address 19001 CRESCENT SPRI | NGS DR | | | | | ^M 2 | М | / D | 3 | D / | Υ | ž 0 Ť | 0 Y | |
| • | | Zip Code 77339 | | | | Amou | nt o | f Eac | h I | Disburs | eme | nt this | Period | |
| Purpose of Disbursement PAYROLL SVC-INSURANCE-TAXES | | | | | | | | | | - | | 906.2 | 3 | |
| Candidate Name | | | | egory/ vpe | | | | | | | | | | |
| Senate President | ment For: Primary Other (speci | General ▼ | | | | | | | | | | | | |
| State: District: Full Name (Last, First, Middle Initial) | | | | | | Trans | aat | ion IF | ١. | SB2 | 1 1 1 | | | |
| CAMPAIGN SOLUTIONS | | | | | | Date o | | isburs | sei | ment | | V V | V | |
| Mailing Address 117 N ST ASAPH ST | | | | | | 1 2 | IVI | , L | 2 | 2 / | <u>' :</u> | ž 0 1 | 0 ' | |
| | | Zip Code 22314 | | | | Amou | nt o | f Eac | h I | Disburs | | | | |
| Purpose of Disbursement CREDIT CARD MERCHANT FEE | | | | - | | | _ | | | _ | | 406.5 | 1 | |
| Candidate Name | | | | egory/ | | | | | | | | | | |
| Office Sought: House Disburse Senate President | ment For: Primary Other (speci | General fy) ▼ | | | | | | | | | | | | |
| State: District: | (5650) | <i>→</i> / ▼ | | | | | | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) . | | | | . • | | | | | | | 21 | 67.4 | Ò | |

TOTAL This Period (last page this line number only)

В.

C.

| ago# 11001027010 | | | |
|---|---|----------------------|---|
| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE (check only | 22 23 24 25 26 |
| Any Information copied from such Reports and Statem | | | |
| or for commercial purposes, other than using the name | and address of any political | committee to sol | icit contributions from such committee |
| NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION CO | DMMITTEE | | |
| Full Name (Last, First, Middle Initial) CAMPAIGN SOLUTIONS | | | Transaction ID: SB21.27 Date of Disbursement |
| Mailing Address 117 N ST ASAPH ST | | | 1 2 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| , | State Zip Code VA 22314 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement WEB SERVICE | | · · · | 150.00 |
| Candidate Name | | Category/ Type | |
| Senate President | ment For: Primary General Other (specify) | | |
| | | | |
| Full Name (Last, First, Middle Initial) CAPLIN & DRYSDALE | | | Transaction ID: SB21.16 Date of Disbursement |
| Mailing Address ONE THOMAS CIR NW | STE 1100 | | 12 |
| , | State Zip Code DC 20005 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement LEGAL CONSULTING | | | 245.00 |
| Candidate Name | | Category/ Type | |
| Senate President | ment For: Primary General Other (specify) | | |
| State: District: | | | |
| Full Name (Last, First, Middle Initial) CAPLIN & DRYSDALE | | | Transaction ID: SB21.45 Date of Disbursement |
| Mailing Address ONE THOMAS CIR NW | STE 1100 | | 12 M / D D / Y Y Y O Y O Y |
| | State Zip Code DC 20005 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement VOID-LEGAL CONSULTING | | | -245.00 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President | ment For: Primary General Other (specify) | | |
| State: District: | (open_j) \ | | |
| SUBTOTAL of Disbursements This Page (optional) . | | > | 150.00 |

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 19/27 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21.28 CD INC Date of Disbursement 2 9 2010 Mailing Address PO BOX 1877 City State Zip Code Amount of Each Disbursement this Period **ALEXANDRIA** VA 22313 319.18 Purpose of Disbursement WEB SERVICE Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21.678 CD INC Date of Disbursement 2 9 2010 Mailing Address PO BOX 1877 City State Zip Code Amount of Each Disbursement this Period **ALEXANDRIA** V۸ 22313 -319.18 Purpose of Disbursement VOID-WEB SVC Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21.8 CHAIN BRIDGE BANK Date of Disbursement 2010 Mailing Address 1445-A LAUGHLIN AVE City State Zip Code Amount of Each Disbursement this Period **MČLEAN** VA 22101 41.29 Purpose of Disbursement BANK FEE Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 41.29 SUBTOTAL of Disbursements This Page (optional) ... \triangleright

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 20 / 27 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21.12 **CMDI** Date of Disbursement 0 3้ 2010 Mailing Address 7704 LEESBURG PKE Citv State Zip Code Amount of Each Disbursement this Period **FALLS CHURCH** VA 22043 505.00 Purpose of Disbursement **DATA ENTRY** Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21.13 **CMDI** Date of Disbursement ЗŎ 2010 Mailing Address 7704 LEESBURG PKE City State Zip Code Amount of Each Disbursement this Period **FÁLLS CHURCH** V۸ 22043 29.90 Purpose of Disbursement DATA ENTRY Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21.26 DAVIS MANAFORT INC Date of Disbursement 2 1 2010 Mailing Address 211 N UNION ST STE 250 City State Zip Code Amount of Each Disbursement this Period **ALEXANDRIA** VA 22314 733.45 Purpose of Disbursement **RENT** Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 1268.35 SUBTOTAL of Disbursements This Page (optional) ... \triangleright

TOTAL This Period (last page this line number only)

В.

C.

| COLLEGE E D. (EEO E OV) | | | |
|---|--|----------------------|--|
| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | FOR LINE (check only | |
| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | X 21b 27 | 22 23 24 25 26 28a 28b 28c 29 30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name | | | |
| NAME OF COMMITTEE (In Full) | | | |
| COUNTRY FIRST POLITICAL ACTION CO | OMMITTEE | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: SB21.5 |
| DAVIS MANAFORT INC | | | Date of Disbursement |
| Mailing Address 211 N UNION ST STE 25 | 50 | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$ |
| , | State Zip Code | | Amount of Each Disbursement this Period |
| | VA 22314 | | -733.45 |
| Purpose of Disbursement VOID-RENT | | • • | -700.40 |
| Candidate Name | | Category/ Type | |
| Senate President | ment For: Primary General Other (specify) | | |
| State: District: | | | |
| Full Name (Last, First, Middle Initial) EH MURRAY GROUP LLC | | | Transaction ID: SB21.15 Date of Disbursement |
| Mailing Address 6510 ANNA MARIA CRT | | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$ |
| , | State Zip Code | | Amount of Each Disbursement this Period |
| | VA 22101 | | 325.00 |
| Purpose of Disbursement FINANCE CONSULTING | | | 020.00 |
| Candidate Name | | Category/ Type | |
| Senate President | ment For: Primary General Other (specify) | | |
| State: District: | | | |
| Full Name (Last, First, Middle Initial) EH MURRAY GROUP LLC | | | Transaction ID: SB21.288 Date of Disbursement |
| Mailing Address 6510 ANNA MARIA CRT | | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$ |
| | State Zip Code VA 22101 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement VOID-FINANCE CONSULTING | | | -325.00 |
| Candidate Name | | Category/ | |
| Office Sought: House Disburse Senate President | ment For: Primary General Other (specify) | Туре | |
| State: District: | | | |
| SUBTOTAL of Disbursements This Page (optional) . | | > | -733.45 |

TOTAL This Period (last page this line number only)

В.

C.

ITEMIZED DISBURSEMENTS

SCHEDULE B (FEC Form 3X) FOR LINE NUMBER: PAGE 22 / 27 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21.14 **FEDEX** Date of Disbursement 2 1 2010 Mailing Address PO BOX 660481 City State Zip Code Amount of Each Disbursement this Period **DALLAS** TX 75266 13.00 Purpose of Disbursement **DELIVERY** Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21.20 INTERNAL REVENUE SERVICE Date of Disbursement ЗŎ 2010 Mailing Address 400 N EIGHTH ST City State Zip Code Amount of Each Disbursement this Period RICHMOND V۸ 23219 1029.88 Purpose of Disbursement PAYROLL TAXES Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21.22 INTERNAL REVENUE SERVICE Date of Disbursement 2010 Mailing Address 400 N EIGHTH ST City State Zip Code Amount of Each Disbursement this Period RICHMOND VA 23219 1029.88 Purpose of Disbursement PAYROLL TAXES Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 2072.76 SUBTOTAL of Disbursements This Page (optional) ... \triangleright

TOTAL This Period (last page this line number only)

В.

C.

| ago# ::00:0=:000 | | | |
|---|---|----------------------|---|
| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE (check only | |
| | | 27 | 28a 28b 28c 29 30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name | | | |
| NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION CO | DMMITTEE | | |
| Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE | | | Transaction ID: SB21.24 Date of Disbursement |
| Mailing Address 400 N EIGHTH ST | | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} J & J & J \\ 3 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} J & J & J \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$ |
| • | State Zip Code VA 23219 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement PAYROLL TAXES | | • | 1029.88 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President State: District: | ment For: Primary General Other (specify) | , | |
| State: District: Full Name (Last, First, Middle Initial) | | | |
| MD STATE DEPARTMENT OF TAXATION | | | Transaction ID: SB21.21 Date of Disbursement |
| Mailing Address 301 W PRESTON ST | | | $\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} \begin{smallmatrix} M \\ 2 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \\ M \end{bmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \\ M \end{bmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \\ M \\ M \end{bmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \\ M \\ M \end{bmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \\ M \\ M \end{bmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \\ M \\ M \end{bmatrix}$ |
| , | State Zip Code MD 21201 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement PAYROLL TAXES | | | 286.65 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President | ment For: Primary General Other (specify) | | |
| State: District: Full Name (Last, First, Middle Initial) | | | |
| MD STATE DEPARTMENT OF TAXATION | | | Transaction ID: SB21.23 Date of Disbursement |
| Mailing Address 301 W PRESTON ST | | | 12 M / D 5 / Y 2 0 1 0 Y |
| | State Zip Code MD 21201 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement PAYROLL TAXES | | | 286.65 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Disburse Senate President | ment For: Primary General Other (specify) | | |
| State: District: | | | |
| SUBTOTAL of Disbursements This Page (optional) . | | | 1603.18 |

TOTAL This Period (last page this line number only)

В.

C.

| SCHEDULE B (FEC Form 3X) | lise sens | arate schedule(s) | | | R LIN | | | R: | | | PA | GE | 24 / | 27 |
|--|--|-------------------|----|-------------|-----------|-------|------------------|--------|-------|-------|----------------|-------|----------|---------|
| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | | (chec | | nly o | ne) 22 | П | 23 | 24 | | | 25 | <u></u> |
| | 2 01400 | oua.y . ago | | | 27 | | 28a | | 28b | | 28c | | 29 | 30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name | | | | | | | | | | | | | | 5 |
| NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | | |
| COUNTRY FIRST POLITICAL ACTION CO | OMMITTE | E | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) MD STATE DEPARTMENT OF TAXATION | ı | | | | | | Trans | | | | | 25 | | |
| MID STATE DEPARTMENT OF TAXATION | ı | | | | | | Date | of Dis | | | ent / \ | , Y | , Y | Υ |
| Mailing Address 301 W PRESTON ST | | | | | | | 1 ^M 2 | | D 3 | 3 1 | L | 2 | 010 |) |
| | State | Zip Code | | | | | Amou | nt of | Each | n Dis | burse | men | t this I | Period |
| BALTIMORE Purpose of Disbursement | MD | 21201 | | | | | | | | | | 2 | 86.65 | 5 |
| PAYROLL TAXES | | | | | | | | _ | | • | | | | |
| Candidate Name | | | | iteg Typ | ory/ | | | | | | | | | |
| Office Sought: House Disburse | ment For: | | | | | | | | | | | | | |
| Senate | Primary | General | | | | | | | | | | | | |
| President State: District: | Other (spe | ecity) 🔻 | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | Trans | aati | on ID | | P01 | 10 | | |
| NOVA-ELAVON | | | | | | | Date | | - | _ | | 10 | | |
| Mailing Address 7300 CHAPMAN HWY | | | | | | | ^M 2 | M / | DC | 2 | / [| ž | 010 |) Y |
| | State | Zip Code | | | | | Amou | nt of | Each | n Dis | burse | men | t this | Period |
| | TN | 37920 | | | | - | | | | | | | 75.00 |) |
| Purpose of Disbursement CREDIT CARD MERCHANT FEE | | | | | | | | - | | | | • | . 0.0 | |
| Candidate Name | | | | teg Typ | ory/ e | | | | | | | | | |
| | ment For: | | | | | | | | | | | | | |
| Senate President | Primary Other (spe | General ecify) | | | | | | | | | | | | |
| State: District: | O tio. (Op o | ····)/ \ | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | Trans | actio | on ID | : 8 | B21. | 155 |) | |
| YUMA SOLUTIONS INC | | | | | | | Date o | of Dis | | | ent / \ | , · v | , · v · | V |
| Mailing Address PO BOX 152075 | | | | | | | 1 2 | / | 2 | 2 1 | ľĽ | 2 | 0 1 (| י ט |
| | State FL | Zip Code 33684 | | | | | Amou | nt of | Each | n Dis | burse | men | t this I | Period |
| Purpose of Disbursement VOID-COMPUTER SUPPORT | | 30001 | | | | | | | | | | -9 | 44.00 | |
| Candidate Name | | | Ca | iten | ory/ | | | | | | | | | |
| | | | | Гур | | | | | | | | | | |
| | ment For: | | | | | | | | | | | | | |
| Senate President | Primary Other (spe | General | | | | | | | | | | | | |
| State: District: | Julio (Spe | ····)/ ▼ | | | | | | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | | | • | 1 | | • | • | | | -58 | 82.35 | 5 |

TOTAL This Period (last page this line number only)

State:

A.

SCHEDULE B (FEC Form 3X)

District:

FOR LINE NUMBER: PAGE 25 / 27 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 21b 22 23 26 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21.9 YUMA SOLUTIONS INC Date of Disbursement 2 1 **1** 2 2010 Mailing Address PO BOX 152075 City State Zip Code Amount of Each Disbursement this Period **TAMPA** FL 33684 944.00 Purpose of Disbursement COMPUTER SUPPORT Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify)

| SUBTOTAL of Disbursements This Page (optional) | • | 944.00 |
|---|---------|----------|
| TOTAL This Period (last page this line number only) | | 17615.43 |

PAGE 26 / 27 **SCHEDULE D (FEC Form 3X)** (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 9 X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION COMMITTEE A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CAMPAIGN SOLUTIONS WEB SERVICE Mailing Address 118 N ST ASAPH ST ZIP Code City State **ALEXANDRIA** VA 22314 Outstanding Balance Beginning This Period Transaction ID: SD10-04 15734.88 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 15734.88 15734.88 1) SUBTOTALS This Period This Page (optional)..... 15734.88 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

15734.88

PAGE 27 / 27 **SCHEDULE D (FEC Form 3X)** (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) X 9 numbered line) **Excluding Loans** 10 NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL ACTION COMMITTEE A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **CARLY FOR CALIFORNIA** REIMBURSEMENT-LIST RENTAL Mailing Address 455 CAPITOL MALL SUITE 801 City State ZIP Code 95814 SACRAMENTO CA Outstanding Balance Beginning This Period Transaction ID: SD9-1 12315.57 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 12315.57 12315.57 1) SUBTOTALS This Period This Page (optional)..... 12315.57 2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

12315.57

0.00